



# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

|   |  |   |
|---|--|---|
| TRANSMITTAL FORM<br><i>(to be used for all correspondence after initial filing)</i> |  | Application Number<br>09/972,223              |
|   |  | Filing Date<br>October 5, 2001                |
|   |  | First Named Inventor<br>Mitchell Rosen et al. |
|   |  | Group Art Unit<br>2623                        |
|   |  | Examiner Name<br>Jingge Wu                    |
| Total Number of Pages in This Submission<br>1                                       |  | Attorney Docket Number<br>1819/100211         |

## ENCLOSURES (check all that apply)

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request (3-Month)<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> A copy of the Notice to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers<br><i>(for an Application)</i><br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Declaration and Power of Attorney<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Application Data Sheet<br><input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures<br><input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt<br><input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> |
|--|---|---|

**RECEIVED**

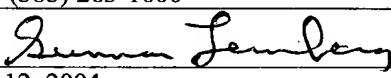
MAY 18 2004

Technology Center 2600

Remarks

The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                                      |   |
|--------------------------------------|---|
| Firm<br><i>or</i><br>Individual name | Gunnar G. Leinberg, Esq.<br>Nixon Peabody LLP<br>Clinton Square, P.O. Box 31051<br>Rochester, New York 14603-1051<br>Telephone: (585) 263-1014<br>Fax: (585) 263-1600 |
| Signature                            | Registration No. 35,584<br>  |
| Date                                 | May 12, 2004  |

## CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

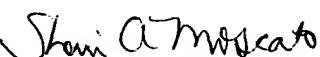
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May 12, 2004

Date



Signature

Sherri A. Moscato

Typed or printed name

**FEE TRANSMITTAL  
FOR FY 2004**

MAY 14 2004  
*Patent fees are subject to annual review.*

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT**

**(\\$) 604**

| Complete if Known    |                       |
|----------------------|-----------------------|
| Application Number   | 09/972,223            |
| Filing Date          | October 5, 2001       |
| First Named Inventor | Mitchell Rosen et al. |
| Examiner Name        | Jingge Wu             |
| Art Unit             | 2623                  |
| Attorney Docket No.  | 1819/100211           |

**METHOD OF PAYMENT (check all that apply)**

Check  Credit Card  Money Order  Other  None

Deposit Account:

Deposit Account Number

14-1138

Deposit Account Name

Nixon Peabody LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

**FEE CALCULATION**

**1. BASIC FILING FEE**

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                  |
|----------------------------|----------------------------|-----------------|---------------------------|
| 1001                       | 770                        | 2001            | 385 Utility filing fee    |
| 1002                       | 340                        | 2002            | 170 Design filing fee     |
| 1003                       | 530                        | 2003            | 265 Plant filing fee      |
| 1004                       | 770                        | 2004            | 385 Reissue filing fee    |
| 1005                       | 160                        | 2005            | 80 Provisional filing fee |
| <b>SUBTOTAL (1)</b>        |                            | <b>(\\$) 0</b>  |                           |

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

|                    |    | Fee from below    | Fee Paid |
|--------------------|----|-------------------|----------|
| Total Claims       | 40 | -41 = 0 X 9 = 0   | 0        |
| Independent Claims | 7  | -4 = 3 X 43 = 129 | 129      |
| Multiple Dependent |    | X 145 = 0         | 0        |

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description   |
|----------------------------|----------------------------|---|
| 1202                       | 18                         | 2202 9 Claims in excess of 20                                     |
| 1201                       | 86                         | 2201 43 Independent claims in excess of 3                         |
| 1203                       | 290                        | 2203 145 Multiple dependent claim, if not paid                    |
| 1204                       | 86                         | 2204 43 ** Reissue independent claims over original patent        |
| 1205                       | 18                         | 2205 9 ** Reissue claims in excess of 20 and over original patent |
| <b>SUBTOTAL (2)</b>        |                            | <b>(\\$) 129</b>  |

\*\* or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

Large Entity | Small Entity

| Fee Code                  | Fee (\$) | Fee Code | Fee (\$) | Fee Description  |
|---------------------------|----------|----------|----------|--|
| 1051                      | 130      | 2051     | 65       | Surcharge - late filing fee or oath  |
| 1052                      | 50       | 2052     | 25       | Surcharge - late provisional filing fee or cover sheet                     |
| 1053                      | 130      | 1053     | 130      | Non-English specification  |
| 1812                      | 2,520    | 1812     | 2,520    | For filing a request for <i>ex parte</i> reexamination                     |
| 1804                      | 920*     | 1804     | 920*     | Requesting publication of SIR prior to Examiner action                     |
| 1805                      | 1,840*   | 1805     | 1,840*   | Requesting publication of SIR after Examiner action                        |
| 1251                      | 110      | 2251     | 55       | Extension for reply within first month                                     |
| 1252                      | 420      | 2252     | 210      | Extension for reply within second month                                    |
| 1253                      | 950      | 2253     | 475      | Extension for reply within third month                                     |
| 1254                      | 1,480    | 2254     | 740      | Extension for reply within fourth month                                    |
| 1255                      | 2,010    | 2255     | 1,005    | Extension for reply within fifth month                                     |
| 1401                      | 330      | 2401     | 165      | Notice of Appeal   |
| 1402                      | 330      | 2402     | 165      | Filing a brief in support of an appeal                                     |
| 1403                      | 290      | 2403     | 145      | Request for oral hearing   |
| 1451                      | 1,510    | 1451     | 1,510    | Petition to institute a public use proceeding                              |
| 1452                      | 110      | 2452     | 55       | Petition to revive - unavoidable   |
| 1453                      | 1,330    | 2453     | 665      | Petition to revive - unintentional   |
| 1501                      | 1,330    | 2501     | 665      | Utility issue fee (or reissue)   |
| 1502                      | 480      | 2502     | 240      | Design issue fee   |
| 1503                      | 640      | 2503     | 320      | Plant issue fee  |
| 1460                      | 130      | 1460     | 130      | Petitions to the Commissioner  |
| 1807                      | 50       | 1807     | 50       | Processing fee under 37 CFR 1.17(q)  |
| 1806                      | 180      | 1806     | 180      | Submission of Information Disclosure Stmt                                  |
| 8021                      | 40       | 8021     | 40       | Recording each patent assignment per property (times number of properties) |
| 1809                      | 770      | 2809     | 385      | Filing a submission after final rejection (37 CFR 1.129(a))                |
| 1810                      | 770      | 2810     | 385      | For each additional invention to be examined (37 CFR 1.129(b))             |
| 1801                      | 770      | 2801     | 385      | Request for Continued Examination (RCE)                                    |
| 1802                      | 900      | 1802     | 900      | Request for expedited examination of a design application                  |
| Other fee (specify) _____ |          |          |          |  |

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** **(\\$) 475**

**CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]**

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May 12, 2004

Date

*Sherri A. Moscati*

Signature

Sherri A. Moscati

Typed or printed name

**SUBMITTED BY**

| Name (Print/Type) | Gunnar G. Leinberg        | Registration No. (Attorney/Agent) | 35,584 | Telephone | (585) 263-1014 |
|-------------------|---------------------------|-----------------------------------|--------|-----------|----------------|
| Signature         | <i>Gunnar G. Leinberg</i> |                                   |        | Date      | May 12, 2004   |

SEND TO: Commissioner for Patents  
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